PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Α	Application or Docket Number 10/811,207			ing Date 26/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FI	.ED	NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		l	N/A]	N/A	770	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A			N/A		N/A]	N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A			N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			mir	minus 20 = *			П	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	minus 3 = *				x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) for additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C			size fee due each ereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL	770	
										OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT	09/29/2009	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUS PAID FOR	SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ	Total (37 CFR 1.18(i))	• 41	Minus	39		- 2		x \$ =		OR	X \$52=	104	
ΙŻ	Independent (37 CFR 1.16(h))	• 4	Minus	4		= 0	ı	x \$ =		OR	X \$220=	0	
Ĭ	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	104	
(Column 1) (Column 2) (Column 3)													
L		CLAIMS REMAININ AFTER AMENDME	IG	HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,18(i))		Minus				l	x \$ =		OR	x \$ =		
Σ	Independent (37 CFR 1.16(h))		Minus	***			l	x \$ =		OR	x \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))						ı			1			
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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